

Item 7.1

# Health Sciences North Board Meeting Minutes – Open Session September 28, 2021

**Voting Members Present:** 

Daniel Giroux
Dr. Catherine Cervin
Helen Bobiwash
Angèle Dmytruk
Lynne Dupuis
Don Duval
Tom Laughren
Lyse-Anne Papineau
Stéphan Plante

Voting Members Excused: Dr. Kevin McCormick Francesca Grosso

**Non-Voting Members Present:** 

Dominic Giroux Dr. John Fenton Lisa Smith

Dr. S. Morris Dr. Dominique Ansell

Staff: Mark Hartman Max Liedke Jennifer Witty

Anthony Keating Maureen McLelland Jason Turnbull

Kelli-Ann Lemieux Dr. Greg Ross

Guests: Jessica Grenier, Chair of the Patient and Family Advisory Program

Dr. Kristy Côté, Chair of the Northern Cancer Foundation

**Recorder:** Anne Gauthier

#### 1.0 Call to Order

The meeting was called to order at 5:30 p.m. with Da. Giroux at the chair. No conflicts of interest were declared.

#### 2.0 Approval of Consent Agenda

Approval of the consent agenda by the Board constitutes approval of each item listed under the Consent Agenda portion of the meeting.

Da. Giroux asked for a motion to approve the consent agenda.

# MOTION: L. Dupuis / L. Papineau

BE IT RESOLVED THAT the consent agenda of the September 28, 2021 Board of Directors meeting be adopted as presented.

**CARRIED** 

# 7.1 Minutes of May 25, 2021 Open Board Meeting

BE IT RESOLVED THAT the minutes of the Board of Directors open session meeting held on May 25, 2021 be approved as circulated.

## 7.2 Board Delegation of Signing Authority

BE IT RESOLVED THAT the Board of Directors remove Chair Elect, Board of Directors as a designated signing officer of the Corporation, and include the Manager, Corporate Reporting as an authorized individual to perform fund transfers between hospital accounts as changes to Board policy IV-2 "Board Delegation of Signing Authority" as recommended by the Finance Committee at its meeting of September 20<sup>th</sup>, 2021, and as presented at the Board of Directors meeting of September 28, 2021.

# 3.0 Approval of Agenda

Da. Giroux asked for a motion to approve the agenda.

# MOTION: R. Gauthier / Dr. Cervin

BE IT RESOLVED THAT the agenda of the September 28, 2021 Board of Directors meeting be adopted as presented.

**CARRIED** 

# 4.0 New Business

#### 4.1 Presentation – Patient and Family Advisory Program

Jessica Grenier, Chair of the Patient and Family Advisory Council (PFAC), provided Board members with an overview of the Patient and Family Advisory Program and reviewed the membership of the PFAC. She also provided an overview of the changes that have been made to the Terms of Reference, most notably an

increase of members on the council from 10 to 11, the creation of a Vice Chair position to build on expertise, and the possibility for the Chair's initial two year term to be extended for an additional two year term.

- J. Grenier also noted that this is her final year as Chair of the PFAC and that she will be working with L. Petz, the new Vice Chair, in an effort to provide orientation and onboarding to her successor.
- J. Grenier then described current improvements to the Patient and Family Advisory Program related to engagement, communication and visibility, and described in detail the following Program Goals for 2021-2022: increasing the number of engagement activities to 110, increase a minimum of 2 activities per clinical program, recruitment of 10 PFAs with a focus on diversity, and developing a mechanism to evaluate both the PFA and staff experience on engagement activities and initiatives.

The Board provided thanks to J. Grenier and the PFAC for their important work.

## 4.2 Presentation: Norther Cancer Foundation

Dr. Kristy Côté, Chair of the Northern Cancer Foundation (NCF) Board of Directors, began her presentation by providing Board members with a brief history of the organization. The NCF has been in place since 1992 and started with a legacy donation of \$20. Since that time, the NCF has raised over \$40M for cancer care treatment, equipment and research with 100% of the funds raised remaining in the community.

Dr. Côté then provided an overview of the NCF's fundraising efforts in 2020-2021 and highlighted a number of initiatives to which funds were distributed, including capital grants supporting the purchase of the Sam Bruno PET Scanner and other equipment at HSN, research grants and direct patient support.

Dr. Côté reviewed the strategic goals shared by the Foundations and the Volunteer Association and thanked Anthony Keating, President and Chief Development Officer for the Foundations and Volunteer Groups, and Tannys Laughren, Executive Director of the NCF, for their leadership in the development of the joint strategic plan between the Foundations and volunteer groups.

Dr. Côté acknowledged that the NCF team has been working hard to find new and innovative ways to raise funds. She highlighted the major fundraising initiatives and donations so far in 2021-2022, including the HSN Joint 50/50 Cash Lottery for the North, a focus on major gift fundraising and the launch of DIY and Cause Marketing programs. There was also special mention of the notable gifts of \$250K from the Sudbury Credit Union, as well as the \$500K from Technica Mining. Other notable fundraising events were also highlighted.

Dr. Côté finished her presentation by reviewing the NCF's upcoming events and outlining the organization's areas of focus moving forward, including the Tour du Nord 2021 Ride, the Virtual Luncheon of Hope, the Radiothon of Hope, a continued focus on Do-it-Yourself Fundraising and Cause Marketing Initiatives, and the Terry Ames raffle.

The Board thanked Dr. Côté for the work of the NCF.

**4.3 Presentation: Social Accountability: Board Responsibility to Equity, Diversity, Inclusion and Allyship**The Regional Vice-President Northeast Cancer Care and Vice-President, Social Accountability began her presentation by outlining the key goals, outcomes, and current work ongoing for Social Accountability.

She then provided an overview of Outcome #10 and the initiatives related to this such as the design, planning and implementation of the 20 bed Reactivation Care Unit at Daffodil Lodge, the implementation of the Senior Friendly Care practices within this unit, as well as the alignment of work with Northeast Specialized Geriatric Centre with the Medical Program to impact Senior Friendly care leading practices.

She further elaborated on Outcome #11 related to access to mental health and addictions care. She noted the work this year, most notably the opening of the 20-bed Addictions Medicine Unit which opened in March of 2021, the ongoing work of HSN's Harm Reduction Committee, the sustaining of an Addictions Consultation team, and the development of an integrated mental health and addictions team. She further outlined the collaboration with funders to garner support for additional services in the community and at HSN.

With respect to Outcome #12 related to cultural safety and diversity training programs, she spoke to the implementation of an Indigenous cultural training approach and how this will be launched in staggered approach to Senior Leaders and subsequently to frontline staff in the Emergency Department and at NeoKids. There was also engagement of people with lived experience from the 2SLGBTQ community and within HSN in the planning and delivery of Pride Week activities, as well as other initiatives related to this particular Outcome.

M. McLelland finished her presentation by reviewing the next steps and the work in progress. Work continues with planning for the occupancy of 52 Reactivation Care/Senior Friendly care beds, expanding residential treatment space for adults seeking withdrawal management, space and staffing plans for Eating Disorders

Day Treatment, and proposals to Indigenous Services Canada to increase 24/7 capacity for onsite Indigenous Navigators, to name a few.

It was asked which activities are planned for the National Day for Truth and Reconciliation. It was noted that the Indigenous Health Program has prepared door and window decals which have been distributed organization-wide. An orange shirt campaign and photo is to be taken and reflected on social media platforms. There will be the lighting of a sacred fire at the Medicine Lodge for staff and patients to visit and pay tribute. At 2:15 there will be a moment of silence, to reflect the 215 unmarked graves located at the Kamloops Residential School earlier in the year. The flags at the Ramsey Lake health Centre will also be lowered to honour those who survived residential schools, the children who lost their lives, and the families and communities affected.

Indigenous Cultural training has been raised at previous meetings. H. Bobiwash flagged that this would be a good opportunity for training during January's plenary session. D. Giroux noted that initial recommendations have been raised, and the recommendation will be coming forward for approval at G&N on October 20<sup>th</sup>. H. Bobiwash cautioned the language 'discovered' rather than 'confirmed' would be more appropriate.

#### **Quality Committee**

#### 4.4 Patient Story

The Chair of the Quality Committee noted that the committee members had the pleasure of meeting the patient that provided the patient story included within the package. The patient story was read aloud to the Board members.

A Board member noted their appreciation for the story. The last two years have been hard for staff across the organization. There is a tendency to focus on the negatives, however there is a need to spend a lot more time on the positives. It was questioned how these stories are shared with other staff across the organization. It was noted that when compliments or stories such as these through are received through Patient Relations, the stories are shared directly with the staff on the unit.

#### 4.5 July Monitoring of QIP Targets

The July Monitoring of July targets are included within the package, on pages 21-22. The report covered the period to the end of July and focused on two indicators. Time to Inpatient Bed and Workplace Violence. The focus remains on ensuring a reduction of Workplace Violence events, however the increase in the number of reporting viewed as positive and it is a positive step to have more people coming forward. The BEST team is now in place, is fully resourced and quickly making progress.

# 4.6 Semi-Annual Report on Utilization Management

The 12 page report was reviewed by the committee and provided a summary and highlighted patient improvement activities. Occupancy, the Emergency Department and Alternate Level of Care were the focus of the report, and further updates will be shared again in March.

## **Governance and Nominating Committee**

# 4.2 Review of Policies III-6, III-7, VI-1, and VI-2

At its August meeting, the Governance and Nominating Committee reviewed the above-noted policies. The CEO, the Senior Vice-President, Patient Experience and Digital Transformation, the Senior Vice-President and Chief Operating Officer, and the President and Chief Development Officer of the Foundations and Volunteer Groups, and the Vice-President People Relations and Corporate Affairs reviewed the policies. No edits were proposed to policy III-6, with minor edits proposed to policies III-7, VI-1 and VI-2.

# MOTION: R. Gauthier / H. Bobiwash

BE IT RESOLVED that the Board of Directors approve the following revised Board Policy, as recommended by the Governance and Nominating Committee at its meeting of August 26, 2021, and as presented and amended at the Board meeting of September 28, 2021:

Policy III-7 Whistle Blowing

Policy VI-1 Support for and Relationship with Foundations of HSN Policy VI-2 Relationship with the HSN Volunteer Association

AND THAT the following Board policies be renewed without amendment:

Policy III-6 Privacy and Security of Information

**CARRIED** 

# **Annual Update from Chief Nursing Executive**

The Chief Nursing Executive began her presentation with a review to the role and the three main domains of the role: governance, leadership and practice. The CNE key responsibilities were also outlined and pertain to Strategic Planning, Organizational Decision Making and Practice Innovation, among others.

L. Smith provided an overview of the past year and the pandemic impact on professional practice. A surge in Health Human Resources, Covid-19 patient care management, and professional practice concerns were amongst the topics discussed.

L. Smith shared graphs that provided detailed information related to number of nursing and extern positions, student and nursing placements, and nurse hiring and attrition.

She outlined the areas of focus that are ongoing, some of which were Health and Human Resources, health and wellness of the nursing workforce, reward and recognition, and Workplace Violence Prevention.

The key takeaways outlined were as follows:

- Sustaining Covid-19 preparedness and competencies
- Safe, effective, and efficient professional practice is paramount for quality care and best possible patient and family experience
- HHR retention and recruitment
- Continuous communication and engagement with the entire workforce

It was asked whether requests have been received from other jurisdictions for education. The Chief Nursing Executive noted that other jurisdictions have attended sessions related to Covid protocols and how to provide treatment in an effort to provide knowledge transfer. Some staff have also parachuted into smaller health centers to lend short term support.

## 5.0 Board Chair and CEO Reports

# 5.1 Board Chair Report

Da. Giroux reviewed his report circulated within the Board package. He elaborated on the following:

- Acknowledgment and thanks to the Past Chair for his years of service and his leadership
- Welcoming of new Board members
- An overview of the current Covid-19 statistics in the community
- Acknowledgement of the President and CEO's extended terms and his indispensable leadership, as well as the valued leadership of the Chief of Staff

The Chair also thanked Dr. Cervin for accepting to be Vice-President of the Board and also noted he is humbled to be the Board Chair for the next two years.

# 5.2 CEO Report

The CEO confirmed that Board members had read the briefing note provided in the meeting package. Board members were content with the information provided. He elaborated on the following points:

- The CEO of Ontario Health, M. Anderson, and their Chief Regional Officer, B. Ktytor, toured HSN's 14 locations on September 14<sup>th</sup>.
- The application for additional funding to reduce surgical wait times.
- The ongoing regional activity to implement the Newco shared service organization to support a regional Electronic Medical Record.
- The ongoing work related to the Human Capital Management Solution, with a target go-live date on track for the four core modules in March 2022.
- The work related to mental health and addictions, notably the Ontario Structured Psychotherapy Program, the expansion of residential withdrawal management beds, the operational funding for a third community based Assertive Community Treatment Team, and the continued work of the Harm Reduction Committee.

## **Adjournment of Open Session**

Da. Giroux asked for a motion to adjourn the open session meeting at 7:04 p.m.

#### MOTION: L. Papineau / S. Plante

THERE BEING no further business to discuss, that the open session meeting of the Board of Directors be adjourned.

**CARRIED**